PAGE 1 / 39

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Use Only	
1.	NAME OF COMMITTEE (in f		PE OR PRINT ▼		nple: If typithe the lines.	ing, type	12FE4M	5	
F	uture45								
	DRESS (number and		O Box 710993						
	Check if diffe than previous reported. (AC	ly . F	Herndon				VA L	20171	-
2.	FEC IDENTIFICA	ATION NUMB	ER ▼	CITY ▲		5	STATE A	ZIP CC	DDE 🛦
	C C00574533		3	. IS THIS REPORT		NEW (N) <b>OR</b>	AM (A)	IENDED	
4.	TYPE OF REP (Choose One)	ORT (	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Rep	orts:		Mar 20 (M3)		Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly July 15	Report (Q1)	(c) 12-Day  PRE-Election	Apr 20 (M4)	Primary (12	Jul 20 (M7)	Oct 2	(12G)	Jan 31 (YE) Runoff (12R)
	Quarterly October		Report for the	e:	Convention	(12C)	Special (	12S)	
	January 3	Report (Q3) 31 Report (YE)	Ele	ection on	M = M /	D    D   /	Y Y Y	in the State of	of
	July 31 N	/lid-Year lon-election	(d) 30-Day POST-Electio		General (30	G)	Runoff (3	0R)	Special (30S)
	Termination (TER)	on Report	·	ection on	M M /	08	2016	in the State of	of
5.	Covering Period	10	01 20	16	through	M M	28	2016	
	ertify that I have execute or Print Name of	V	eport and to the bes Vojciechowski, Maria, ,	t of my know ,	ledge and	belief it is tru	e, correct and	d complete.	
Sig	nature of Treasurer	Wojciecho ———	wski, Maria, , ,	1	Electronical	<i>ly Filed]</i> □	ate 12	/ 08 /	2016
NO	TE: Submission of fa	alse, erroneous	, or incomplete inform	ation may sub	oject the pe	rson signing th	is Report to th	ne penalties of 52	U.S.C. § 30109.
1	Office Use							FEC FOR Rev. 05/2	

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Future45 10 01 2016 11 28 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 708732.18 January 1, 2016 (b) Cash on Hand at 9920259.06 Beginning of Reporting Period..... 11314504.87 23736569.86 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 24445302.04 21234763.93 6(a) and 6(c) for Column B)..... 21140118.46 24350656.57 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 94645.47 94645.47 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Receipts FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name Future45 01 10 2016 11 28 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 11270732.20 23692472.19 (i) Itemized (use Schedule A)..... 2772.67 3097.67 (ii) Unitemized ..... (iii) TOTAL (add 23695569.86 11273504.87 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 41000.00 41000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 23736569.86 11314504.87 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 23736569.86 11314504.87

11314504.87

23736569.86

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B
Operating Expenditures: —	Iotal IIIIs Fellou	Calendar Year-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
Ē		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	52505 20	327865.29
Expenditures(c) Total Operating Expenditures	52595.20	327003.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	52595.20	327865.29
Transfers to Affiliated/Other Party	32333.20	021000.20
Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	4 4
and Other Political Committees	150000.00	150000.00
Independent Expenditures		7 7 7
(use Schedule E)	20937523.26	23872791.28
(52 U.S.C. § 30116(d))	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
. Louir riepayments wade	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:	45 45 45	4 4
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
<u> </u>	4 4	<u> </u>
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
,	4 4	4 4
Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
, _	7 7	7
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	21140118.46	24350656.57
	4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 4 4 4
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	21140118.46	24350656.57

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 11314504.87 23736569.86 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 23736569.86 11314504.87 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 52595.20 327865.29 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 52595.20 327865.29 (subtract Line 37 from Line 36) ......

FOR LINE NUMBER: **PAGE** 6 Use separate schedule(s) (check only one) **X** 11a 11b 11c

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OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Future45 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LINDNER, EDYTH, B., , Date of Receipt Mailing Address P.O. BOX 358 10 03 2016 City Zip Code State Transaction ID: SA11A.20 OH **CINCINNATI** 45201-Amount of Each Receipt this Period FEC ID number of contributing C 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **INVESTOR** CONTRIBUTION SELF-EMPLOYED Receipt For: Aggregate Year-to-Date ▼ Primary General 50000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCMAHON, LINDA, E., , Date of Receipt Mailing Address 14 HURLINGHAM DRIVE 10 2016 City State Zip Code Transaction ID: SA11A.19 **GREENWICH** CT 06831-Amount of Each Receipt this Period FEC ID number of contributing 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYÉD CONTRIBUTION **EXECUTIVE** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. LINDNER, CARL, H., , III Date of Receipt Mailing Address 301 E 4TH ST, 40S 10 04 2016 City Zip Code State Transaction ID: SA11A.21 OH **CINCINNATI** 45202-Amount of Each Receipt this Period FEC ID number of contributing C 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AMERICAN FINANCIAL GROUP INC. CONTRIBUTION CO-CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 50000.00 Other (specify) 1100000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

39 FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Future45 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LINDNER, S., CRAIG, , Date of Receipt Mailing Address 7725 BUCKINGHAM ROAD 2016 07 City Zip Code State Transaction ID: SA11A.22 OH **CINCINNATI** 45243-Amount of Each Receipt this Period FEC ID number of contributing C 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AMERICAN FINANCIAL GROUP INC. CO-CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 50000.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** WEISS, ELIZABETH, , , Date of Receipt Mailing Address 1304 HAWTHORNE LANE 10 2016 City State Zip Code Transaction ID: SA11A.23 HINSDALE IL 60524-Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** CONTRIBUTION **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ROSANO, JAMES, , , Date of Receipt Mailing Address 6594 APPLEWOOD ST. 10 23 2016 City State Zip Code Transaction ID: SA11A.25 CA **HIGHLAND** 92346-Amount of Each Receipt this Period FEC ID number of contributing C 999.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION **GROVE 76** SERVICE STATION Receipt For: Aggregate Year-to-Date ▼ Primary General 999.00 Other (specify) 55999.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** 8 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c Detailed Summary Page

39 OF ITEMIZED RECEIPTS 12 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Future45 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name POSCA, GLENN, , , Date of Receipt Mailing Address 317 CHISWELL RD. 26 2016 City Zip Code State Transaction ID: SA11A.26 NY **SCHENECTADY** 12304-Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION TECHNOLOGY CONTRIBUTION **CDTC** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCNULTY, ANDREW, , , Date of Receipt Mailing Address P.O. BOX 13275 10 2016 City State Zip Code Transaction ID: SA11A.27 **PORTLAND** OR 97213-Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** CONTRIBUTION **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ADELSON, MIRIAM, , , Date of Receipt Mailing Address 3355 LAS VEGAS BLVD. SOUTH 10 28 2016 City Zip Code State Transaction ID: SA11A.29 NV LAS VEGAS 89109-8941 Amount of Each Receipt this Period FEC ID number of contributing C 5000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION ADELSON DRUG CLINIC **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 10000000.00 Other (specify) 5000900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

39 FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Future45 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ADELSON, SHELDON, , , Date of Receipt Mailing Address 3355 LAS VEGAS BLVD. SOUTH 10 28 2016 City Zip Code State Transaction ID: SA11A.28 NV LAS VEGAS 89109-8941 Amount of Each Receipt this Period FEC ID number of contributing C 5000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LAS VEGAS SANDS, INC. **CHAIRMAN** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JENCKS, JONATHAN, , , Date of Receipt Mailing Address 17 HIDDEN VALLEY CT. 2016 11 City State Zip Code Transaction ID: SA11A.31 **FISHERSVILLE** VA 22939-Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYÉD CONTRIBUTION CPA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. MCNECE, GREGORY, , , Date of Receipt Mailing Address 2225 ANZA AVE. 02 2016 City Zip Code State Transaction ID: SA11A.32 CA **DAVIS** 95616-Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DAVISVILLE PROPERTIES, INC. CONTRIBUTION VICE-PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 5001250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

39 FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Future45 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DUNCAN, DEBBIE, , , Date of Receipt Mailing Address 807 DAVIS ST. 2016 11 04 City Zip Code State Transaction ID: SA11A.34 IL **EVANSTON** 60201-Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **RETIRED** CONTRIBUTION RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JONES, SCOTT, , , Date of Receipt Mailing Address 305 FOXBOROUGH LANE 2016 11 City State Zip Code Transaction ID: SA11A.33 SOUTHLAKE TX 76092-Amount of Each Receipt this Period FEC ID number of contributing 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYÉD **ER PHYSICIAN** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. COLBURN, RICHARD, W., , Date of Receipt Mailing Address 555 SKOKIE BLVD 05 2016 SUITE 555 City State Zip Code Transaction ID: SA11A.35 IL **NORTHBROOK** 60062-Amount of Each Receipt this Period FEC ID number of contributing C 100000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PAYROLL AND INSURANCE GROUP INC. CONTRIBUTION **EXECUTIVE** Receipt For: Aggregate Year-to-Date ▼ Primary General 100000.00 Other (specify) 110500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

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11 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Future45 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 45COMMITTEE INC. Date of Receipt Mailing Address P.O. BOX 710993 2016 11 28 City Zip Code State Transaction ID: SA11A.36 VA **HERNDON** 20171-0993 Amount of Each Receipt this Period FEC ID number of contributing C 2083.20 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION IN-KIND: FUNDRAISING CONSULTING Receipt For: Aggregate Year-to-Date ▼ Primary General 18823.19 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2083.20 SUBTOTAL of Receipts This Page (optional)..... 11270732.20 TOTAL This Period (last page this line number only).....

#### S 17

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	ny information copied from such Reports and State for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) Future45											
<b>A</b> .	Full Name of Individual (Last, First, Middle Initi REBUILDING AMERICA NOW	al) or Full C	Orga	nization Name		Date o	of Do	noint				
Α.	Mailing Address P.O. BOX 26141					M = N		D .		Y		Υ
	City	State		Zip Code	$\dashv$	11 Tran	oneti.	04	: SA11A	201	5	
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	FEC ID number of contributing federal political committee.	C co	0618	8876		7411041		Laoii	Tioodipt t	410	00.00	
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)			Memo D: ME		RODUCT	ΓΙΟΝ		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 41000.00								
— В.	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Orga	nization Name		Date of	of Red	ceipt				
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5	SUBTOTAL of Receipts This Page (optional)			·····						4100	00.00	0

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	Tysons Corner Purpose of Disbursement	VA	22182						
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	State: District:	Other (spec	city)		Mem	ltem			
_	Full Name (Last, First, Middle Initial)								
C.	Anedot				Date of D	isburseme	nt		
	7110001				M I M	/ D D	/ Y	Y Y Y	1
	Mailing Address P.O. Box 84314				10	11	l L.	2016	
	City	State	Zip Code						
	Baton Rouge	LA	70884		FEC Iden	tification N	umber		
	Purpose of Disbursement		<del>'</del>		С				
	Merchant fee			002		saction ID	: SB.9		
	Candidate Name			Category/	Amount o	f Each Dis	burseme	ent this Per	riod
	Office Sought: House Disburser	nent For:		Туре				7.32	$\neg$
	Senate Disburser	Primary	General			7	7		
	President	Other (spec			Mom	o Item			
	State: District:				l liviem				
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SCHEDULE B (FEC Form 3X)	lles	make ask-title()	FOR LINE	NUMBER:		PAGE 14 OF 39	
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only		7.00 <u> </u>		
		Summary Page	<b>X</b> 21b 28a	22 28b	23 28c	26 27 29 30b	
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Any information copied from such Reports and Stater or for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full)							
Future45							
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A. Anedot				Date of Di	isbursement			
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Full Name (Last, First, Middle Initial) <b>B.</b> Anedot				Date of Di	isbursement			
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  Future45  Full Name (Last, First, Middle Initial)  A. Anedot  Mailing Address P.O. Box 84314  City Senate President Permary General Permary General Permary General Other (specify) ▼  Date of Disbursement  ### Permary Permary General Other (specify) ▼  Date of Disbursement Disbursement Disbursement For:    Senate Purpose of Disbursement Disbursement For:   Senate Purpose of Disbursement Merchant fee   Disbursement Permary General Disbursement Disbursement Disbursement Disbursement Disbursement Disbursement Disbursement Merchant fee   Disbursement Disbursemen	Λ.	v information conicd from such Departs and Ctatan	nonte mou	not he sold or use					
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Purpose of Disbursement Merchant fee Candidate Name Office Sought: House Primary General President State: District:  Full Name (Last, First, Middle Initial) B. Anedot  Mailing Address P.O. Box 84314  City Baton Rouge LA 70884 Purpose of Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary General President District:  Full Name (Last, First, Middle Initial) City State Zip Code Baton Rouge LA 70884  Category/ Type Office Sought: House Disbursement For: Senate Primary General President State: District:  Full Name (Last, First, Middle Initial) City Senate Primary General Primary Genera		,		1 '		FEC Identi	fication Nu	umber	
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Purpose of Expenditure Polling		Category/ Type 005		of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>x</b> Presid	
Calendar Year-To-Date Per Election for Office Sought	7	2780543.96	Disburseme	nt For: Primary   ☐ General  Other (specify)   ☐
Full Name of Payee		Memo		of Public Distribution/Dissemination
Del Cielo Media				10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1427 Leslie Avenue				
Suite 102			Amou	unt
City	State	Zip Code		400000.00
Alexandria	VA	22301		of Disbursement or Obligation
Purpose of Expenditure  Media placement		Category/ Type 004		10 / 21 / 2016
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		x Oppose	<b>X</b> Presid	lent Senate State:
Calendar Year-To-Date		6780543.96	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7 7	0,000 10.00	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [	4025000.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		· [	
(a) TOTAL Independent Expenditures			·	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Wojciechowski, Maria, , ,	Electronically Fil	led1 –	M = M /	00 / 7016
Signature		Date	12	08 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 25 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
Future45				
				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
McCarthy Hennings Whalen				10 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1850 M Street NW				
Suite 235			A	mount
City	State	Zip Code		22135.58
Washington	DC	20036		ransaction ID : SE003 Pate of Disbursement or Obligation
Purpose of Expenditure Media production		Category/ Type 004		10 24 2016
Name of Federal Candidate:		Support	Office S	ought: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose		resident Senate State:
Calendar Year-To-Date			Disburse	ement For: Primary X General
Per Election for Office Sought	7	6802679.54	2016	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	rate of Public Distribution/Dissemination
McCarthy Hennings Whalen				M M / D D / Y Y Y Y
Mailing Address 1850 M Street NW				10 22 2016
Suite 235			Α	mount
City	State	Zip Code		26545.73
Washington	DC	20036		Fransaction ID : SE004 late of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
Media production		Type 004		10 24 2016
Name of Federal Candidate:		Support	Office S	ought: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	X Pi	resident Senate State:
Calendar Year-To-Date		6829225.27		ement For: Primary X General
Per Election for Office Sought	7 7	0029225.27	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	48681.31
(a) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(a) TOTAL Independent Expenditures			. г	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Wojciechowski, Maria, , ,	Electronically Fil	ed]	M = M	08 2016
Signature		Date	e 12	08 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 26 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
Future45				
				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
DDC				10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 805 15th Street, NW				
Suite 300			Am	ount
City	State	Zip Code		800000.00
Washington	DC	20005		ansaction ID : SE005 te of Disbursement or Obligation
Purpose of Expenditure Media placement		Category/ Type 004		10
Name of Federal Candidate:		Support	Office So	ught: House District:
Clinton, Hillary, , ,		× Oppose	<b>✗</b> Pre	
Calendar Year-To-Date		7629225.27	Disburser	nent For: Primary X General
Per Election for Office Sought	7 7	1023220.21	2016	Other (specify) ▶
Full Name of Payee Mentzer Media Services		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mentzer Media Services				10 29 7 2016
Mailing Address 210 W. Pennsylvania Ave.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	acunt
Suite 250			All	ount
City	State	Zip Code		1185000.00
Towson	MD	21204		ansaction ID : SE006 te of Disbursement or Obligation
Purpose of Expenditure  Media placement		Category/ Type 004		10 / 27 / 2016
Name of Federal Candidate:		Support	Office So	ught: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>X</b> Pre	sident Senate State:
Calendar Year-To-Date		204 4225 27	Disburser	nent For: Primary Seneral
Per Election for Office Sought	7 7	8814225.27	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·			1985000.00
(a) SUBTOTAL of Unitemized Independent Expenditur	'es			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Wojciechowski, Maria, , ,	[Electronically File	edl –	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 12	08 2016

Signature

### SCHEDULE E (FEC Form 3X)

JOHE DOLL L (1 LO 1 Jim JA)				
TEMIZED INDEPENDENT EXPENDITURES	ı			PAGE 27 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
Future45				
				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee Univision Communications		☐ Memo	Item D	Date of Public Distribution/Dissemination
Mailing Address P.O. Box 199				10 29 2016
P.O. Box 189			A	mount
City	State	Zip Code		6000.00
Teaneck	NJ	07666		Transaction ID : SE007 Date of Disbursement or Obligation
Purpose of Expenditure Media production		Category/ Type 004		10 / 29 / 2016
Name of Federal Candidate:		Support	Office S	Sought: House District:
Clinton, Hillary, , ,		x Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	8820225.27	Disburse 2016	ement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee Bohemian Sound		☐ Memo	Item D	Date of Public Distribution/Dissemination  10 29 2016
Mailing Address 21 Catalonia Ave. Suite 100			A	mount
City	State	Zip Code		1000.00
Coral Gables	FL	33134		Transaction ID : SE008 Date of Disbursement or Obligation
Purpose of Expenditure Media production		Category/ Type 004		10 / 29 / 2016
Name of Federal Candidate:		Support	Office S	Sought: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>X</b> Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	8821225.27	Disburse 2016	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures	\$		• [	7000.00
(a) SUBTOTAL of Unitemized Independent Expenditu	res			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Wojciechowski, Maria, , ,	[Electronically File	led] Dot	M = M	/ D D / Y T Y T Y T Y T Y T Y T Y T Y T Y T Y

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Future45 C00574533 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee Interface Media Group 10 29 2016 Mailing Address 1233 20th Street NW Amount State Zip Code 3269.01 City DC 20036 Transaction ID: SE009 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Media production 004 10 29 2016 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **x** President Senate State: Primary Disbursement For: **X** General Calendar Year-To-Date 8824494.28 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item DDC 01 2016 Mailing Address 805 15th Street, NW Amount Suite 300 77984.40 City State Zip Code Transaction ID: SE010 Washington DC 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ Phone calls 004 26 2016 10 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 8902478.68 2016 Per Election for Office Sought Other (specify) ▶ 81253.41 (a) SUBTOTAL of Itemized Independent Expenditures ..... (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Wojciechowski, Maria, , , [Electronically Filed] 80 2016 Date Signature

PAGE

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OF

PAGE 29 OF 39 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Future45 C00574533 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full\_Name of Payee **DDC** 11 01 2016 Mailing Address 805 15th Street, NW Amount Suite 300 State Zip Code 175000.00 City DC 20005 Transaction ID: SE011 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Media placement 004 2016 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **x** President Senate State: Primary Disbursement For: **X** General Calendar Year-To-Date 9077478.68 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item McCarthy Hennings Whalen 01 2016 Mailing Address 1850 M Street NW Amount Suite 235 25456.12 City State Zip Code Washington Transaction ID: SE012 DC 20036 Date of Disbursement or Obligation Purpose of Expenditure Category/ Media production 004 02 2016 11 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 9102934.80 2016 Per Election for Office Sought Other (specify) ▶ 200456.12 (a) SUBTOTAL of Itemized Independent Expenditures ..... (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Wojciechowski, Maria, , , [Electronically Filed] 80 2016 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 30 OF 39 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Future45				C C00574533
				G 00074000
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Del Cielo Média			N	11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1427 Leslie Avenue			Amou	nt
Suite 102				
City	State	Zip Code	ـــاِ ا	3500000.00
Alexandria	VA	22301		action ID : SE013 of Disbursement or Obligation
Purpose of Expenditure Media placement		Category/ Type 004		10 24 7 2016
Name of Federal Candidate:		Support	Office Sough	nt: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	X Preside	
Calendar Year-To-Date			Disbursemen	ut For: Primary X General
Per Election for Office Sought	1	2602934.80	2016 c	other (specify)
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
DDC			N	1 M / D D / Y Y Y Y
Mailing Address			L	11 02 2016
805 15th Street, NW Suite 300			Amou	nt
City	State	Zip Code	<u> П</u>	181250.40
Washington	DC	20005		saction ID : SE014 of Disbursement or Obligation
Purpose of Expenditure	1	Category/	- N	1 M / D D / Y Y Y Y
Phone calls		Type 004	<b>-</b>	11 01 2016
Name of Federal Candidate:		Support	Office Sough	nt: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>X</b> Preside	ent Senate State:
Calendar Year-To-Date		0704405 00	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7 1	2784185.20	2016 C	other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				3681250.40
(a) SUBTOTAL of Unitemized Independent Expenditur	es		•	
			_	
(a) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Wojciechowski, Maria, , ,	Electronically Fil	ed1 -	M M /	00 / YTYTY
Signature		Date	12	08 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 31 OF 39 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Future45			l r	C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date of	Public Distribution/Dissemination
DDC			M	
Mailing Address 905 15th Street NW				1 02 2016
Suite 300			Amount	
City	State	Zip Code		1482780.00
Washington	DC	20005		ction ID : SE015
Purpose of Expenditure				Disbursement or Obligation
Media placement		Category/ Type 004	. M	
Name of Federal Candidate:		Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	<b>x</b> Presiden	t Senate State:
Calendar Year-To-Date Per Election for Office Sought	1	4266965.20	Disbursement 2016	
5 11 11 15				er (specify)
Full Name of Payee DDC				Public Distribution/Dissemination
			1	1 02 Y Y Y Y Y Y Y
Mailing Address 805 15th Street, NW			Amount	
Suite 300	Γ-	I		10000100
City Washington	State	Zip Code 20005		182334.92 ction ID : SE016
Purpose of Expenditure		Category/		Disbursement or Obligation
Phone calls		Type 004		1 02 2016
Name of Federal Candidate:		Support	Office Sought:	House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>X</b> Presiden	t Senate State:
Calendar Year-To-Date	1	4449300.12	Disbursement I	For: Primary 🗶 General
Per Election for Office Sought	7	4449300.12	2016 Oth	er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	1665114.92
				, ,
(a) SUBTOTAL of Unitemized Independent Expenditur	es		<b>•</b>	
(a) TOTAL Independent Expenditures				
(a) TOTAL independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Wojciechowski, Maria, , ,	Electronically Fil	ed]		08 2016
Signature		Date	12	2010

PAGE 32 OF 39 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Future45 C00574533 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee Del Cielo Média 11 02 2016 Mailing Address 1427 Leslie Avenue Amount Suite 102 State Zip Code 7000000.00 City 22301 Transaction ID: SE017 VA Alexandria Date of Disbursement or Obligation Purpose of Expenditure Category/ Media placement 004 2016 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **x** President Senate State: Primary Disbursement For: **X** General Calendar Year-To-Date 21449300.12 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Madison McQueen 02 2016 Mailing Address 135 Richmond Street Amount 500000.00 City State Zip Code Transaction ID: SE018 El Segundo CA 90245 Date of Disbursement or Obligation Purpose of Expenditure Category/ Media placement 004 02 2016 11 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 21949300.12 2016 Per Election for Office Sought Other (specify) ▶ 7500000.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Wojciechowski, Maria, , , [Electronically Filed] 80 2016 Date Signature

TEMPER MADE ENDERN EXILENDITORED				FOR LINE 24 OF FORM 2V
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Future45				FEC IDENTIFICATION NUMBER ▼
				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee McCarthy Hennings Whalen		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				11 02 7 2016
1850 M Street NW Suite 235				Amount
Suite 235	State	Zip Code		98504.74
Washington	DC	20036		Transaction ID : SE019 Date of Disbursement or Obligation
Purpose of Expenditure Media production		Category/ Type 004	4	11 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:
Clinton, Hillary, , ,		X Oppose	l	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	2	22047804.86	Disbu 2016	ursement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Liquidus Marketing				11 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 372 W. Ontario				Amount
Suite 400				
City	State	Zip Code		100000.00
Chicago	IL	60654		Transaction ID : SE020  Date of Disbursement or Obligation
Purpose of Expenditure  Media placement		Category/ Type 004		11 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	×	President Senate State:
Calendar Year-To-Date		2147804.86		ursement For: Primary X General
Per Election for Office Sought		2147004.00	2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			▶	198504.74
(a) SUBTOTAL of Unitemized Independent Expenditur	'es			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Wojciechowski, Maria, , ,	[Electronically File	ed] Date	e 1:	2 08 2016
Signature		Date	9 1.	2 00 2010

TEMPER MADE ENDERN EXILENDITORED				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Future45				FEC IDENTIFICATION NUMBER ▼
				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee Madison McQueen		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				11 03 2016
135 Richmond Street				Amount
City	State	Zip Code		1400.00
El Segundo	CA	90245		Transaction ID : SE021 Date of Disbursement or Obligation
Purpose of Expenditure Media production		Category/ Type 004	4	11 04 2016
Name of Federal Candidate:		Support	Office	e Sought: House District:
Clinton, Hillary, , ,		<b>X</b> Oppose	x	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		22149204.86	Disbu 2016	orsement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Mentzer Media Services				11 04 2016
Mailing Address 210 W. Pennsylvania Ave.				Amount
Suite 250				
City	State	Zip Code		5200.00
Towson	MD	21204		Transaction ID : SE022  Date of Disbursement or Obligation
Purpose of Expenditure  Newspaper ad		Category/ Type 004	4	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: House District:
Clinton, Hillary, , ,		Oppose	x	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	2	22154404.86	Disbu 2016	rsement For: Primary General
rei Liection for Office Sought	7 7		2010	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			▶	6600.00
(a) SUPTOTAL of Unitemized Independent Expanditure				
(a) SUBTOTAL of Unitemized Independent Expenditur	es		▶	
(a) TOTAL Independent Expenditures			·· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Wojciechowski, Maria, , ,	Electronically File	ed] Det	M	2 08 2016
Signature		Date	te 1:	2 00 2010

TEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 39 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Future45				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
DDC				M M / D D / Y Y Y Y
Mailing Address 805 15th Street, NW			_	11 04 2016
Suite 300			Amo	unt
City	State	Zip Code	— F	10500.00
Washington	DC	20005		saction ID : SE023
Purpose of Expenditure		Catanani	Date	of Disbursement or Obligation
Media production		Category/ Type 004	1	11 01 7 2016
Name of Federal Candidate:		Support	Office Soug	ght: House District:
Clinton, Hillary, , ,		x Oppose	<b>x</b> Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	2	2164904.86	Disburseme	
5 11 11 15	1		1_	Other (specify) ▶
Full Name of Payee Del Cielo Media		∐ Memo	Item Date	of Public Distribution/Dissemination
				11 04 2016
Mailing Address 1427 Leslie Avenue			Amo	unt
Suite 102	la			
City Alexandria	State VA	Zip Code 22301		1100000.00  nsaction ID : SE024  of Disbursement or Obligation
Purpose of Expenditure		Category/	_	M M / D D / Y Y Y Y
Media placement		Type 004		11 04 2016
Name of Federal Candidate:		Support	Office Soug	ght: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>X</b> Presi	dent Senate State:
Calendar Year-To-Date	2	3264904.86	Disburseme	ent For: Primary 🗶 General
Per Election for Office Sought	2	3204304.00	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• []	1110500.00
				, , , , , , , , , , , , , , , , , , , ,
(a) SUBTOTAL of Unitemized Independent Expenditur	es		· • [	
(a) TOTAL Independent Expenditures				
(a) TOTAL independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Wojciechowski, Maria, , ,	Electronically Fil	ed]	M M M /	08 2016
Signature		Date	e 12	30 2010

TEMIZED INDEPENDENT EXPENDITURES				PAGE 36 OF 39 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Future45				C C00574533
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Cold Harbor Films		_ Memo	_	11 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 Slaters Lane			Amou	int
City	State	Zip Code	— I I I	15574.00
Alexandria	VA	22314		saction ID : SE025 of Disbursement or Obligation
Purpose of Expenditure Media production		Category/ Type 004		11 04 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>x</b> Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought		3280478.86	Disbursemer 2016	nt For:  Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Rebuilding America Now Ultimate Vendor-Cold Harbor Films			[	11 04 2016
Mailing Address P.O. Box 26141			Amou	int
Olt	04-4-	7'- O- I-		41000.00
City Alexandria	State VA	Zip Code 22313	I	saction ID : SE026 of Disbursement or Obligation
Purpose of Expenditure In-kind media production		Category/ Type 004		11 04 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>X</b> Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought	2	3321478.86	Disbursemen 2016	nt For:  Primary
•				
(a) SUBTOTAL of Itemized Independent Expenditures			· • [	56574.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es			
(,, , , , , , , , , , , , , , , , , , ,				
(a) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Wojciechowski, Maria, , ,	Electronically Fil	ed] _	M M /	09 / 7 7 7 7 7
Signature	1	Date	12	08 2016

ITEMIZED INDEPENDENT EXPENDITURES PAGE 37 OF 39 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Future45 C00574533 Check if 24-hour report 48-hour report New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Spot Xchange 11 05 2016 Mailing Address 11030 CirclePoint Rd. Amount State Zip Code 100000.00 City CO 80080 Transaction ID: SE027 Westminster Date of Disbursement or Obligation Purpose of Expenditure Category/ Media placement 004 03 2016 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **x** President Senate State: Primary Disbursement For: **X** General Calendar Year-To-Date 23421478.86 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item McCarthy Hennings Whalen 2016 06 Mailing Address 1850 M Street NW Amount Suite 235 9259.61 City State Zip Code Transaction ID: SE028 Washington DC 20036 Date of Disbursement or Obligation Purpose of Expenditure Category/ Media production 004 2016 11 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 23430738.47 2016 Per Election for Office Sought Other (specify) ▶ 109259.61 (a) SUBTOTAL of Itemized Independent Expenditures ..... (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Wojciechowski, Maria, , , [Electronically Filed] 80 2016 Date Signature

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Future45 C00574533 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee McCarthy Hennings Whalen 11 07 2016 Mailing Address 1850 M Street NW Amount Suite 235 State Zip Code 15466.74 City DC 20036 Transaction ID: SE029 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Media production 004 17 2016 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **x** President Senate State: Primary Disbursement For: **X** General Calendar Year-To-Date 23446205.21 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Del Cielo Media 08 2016 Mailing Address 1427 Leslie Avenue Amount Suite 102 200000.00 City State Zip Code Alexandria Transaction ID: SE030 VA 22301 Date of Disbursement or Obligation Purpose of Expenditure Category/ Media placement 004 2016 11 Type Name of Federal Candidate: Support Office Sought: House District: Clinton, Hillary, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 23646205.21 2016 Per Election for Office Sought Other (specify) ▶ 215466.74 (a) SUBTOTAL of Itemized Independent Expenditures ..... (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Wojciechowski, Maria, , , [Electronically Filed] 80 2016 Date Signature

PAGE

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OF

TEMIZED INDEPENDENT EXPENDITURES				PAGE 39 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
Future45				
				C C00574533
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report				
Full Name of Payee			Item Dat	te of Public Distribution/Dissemination
DDC				11 08 2016
Mailing Address 805 15th Street, NW				
Suite 300			Am	ount
City	State	Zip Code		23431.01
Washington	DC	20005		ansaction ID : SE031 te of Disbursement or Obligation
Purpose of Expenditure Phone calls		Category/ Type 004		11 08 2016
Name of Federal Candidate:		Support	Office Sou	ught: House District:
Clinton Hillony			<b>✗</b> Pres	
Calendar Year-To-Date		Andrea i	Disbursen	nent For: Primary General
Per Election for Office Sought	2	3669636.22	2016	Other (specify) ▶
Full Name of Payee			Item Dat	te of Public Distribution/Dissemination
DDC				11 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 805 15th Street, NW				
Suite 300			Am	ount
City	State	Zip Code		23431.00
Washington	DC	20006		ansaction ID : SE032 te of Disbursement or Obligation
Purpose of Expenditure Phone calls	Category/			11 08 2016
		Type 004		
Name of Federal Candidate:				ught: House District:
Trump, Donald, , ,	Oppose			sident Senate State:
Calendar Year-To-Date	22602067 22			nent For: Primary Seneral
Per Election for Office Sought	7 7		2010	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		• •	46862.01
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) 652161712 of etimolinizati independent Experience				
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Wojciechowski, Maria, , ,	[Electronically File	ed1	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	e 12	08 2016